

TRANSCRIPT ORDER

FOR COURT USE ONLY  
DUE DATE:

1. NAME Richard B. North, Jr.		2. PHONE NUMBER (404) 322-6000		3. DATE 1/3/2019	
4. FIRM NAME Nelson Mullins Riley & Scarborough, LLP					
5. MAILING ADDRESS 201 17th St., N.W., Ste. 1700			6. CITY Atlanta		7. STATE GA
8. ZIP CODE 30363					
9. CASE NUMBER 2:15-md-02641		10. JUDGE David G. Campbell		DATES OF PROCEEDINGS	
				11. see below	
				12.	
13. CASE NAME IN RE: Bard IVC Filters Products Liability Litigation		LOCATION OF PROCEEDINGS			
		14. Phoenix		15. STATE AZ	
16. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> BANKRUPTCY	
				<input type="checkbox"/> OTHER (Specify)	

17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested.)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input checked="" type="checkbox"/> PRE-TRIAL PROCEEDING	12/15/2017; 1/19/2018
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input checked="" type="checkbox"/> OTHER (Specify)	Booker (3/14/18-3/30/18)
<input type="checkbox"/> SENTENCING		Final trial transcripts for	Jones (5/15/18-6/1/18)
<input type="checkbox"/> BAIL HEARING			Hyde (9/18/18-10/5/18)

18. ORDER

CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FIRST COPY	# OF ADDITIONAL COPIES	DELIVERY INSTRUCTIONS (Check all that apply.)	ESTIMATED COSTS
30 DAYS	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PAPER COPY	
14 DAYS	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PDF (e-mail)	
7 DAYS	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/> ASCII (e-mail)	
3 DAYS	<input type="checkbox"/>	<input type="checkbox"/>			
DAILY	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>			
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			

E-MAIL ADDRESS  
maria.turner@nelsonmullins.com; cpaulsen@swlaw.com

CERTIFICATION (19. & 20.) By signing below, I certify that I will pay all charges (deposit plus additional).

**NOTE: IF ORDERING MORE THAN ONE FORMAT, THERE WILL BE AN ADDITIONAL CHARGE.**

19. SIGNATURE /s/ Richard B. North, Jr.

20. DATE 1/3/2019

TRANSCRIPT TO BE PREPARED BY			ESTIMATE TOTAL	
ORDER RECEIVED	DATE	BY	PROCESSED BY	
DEPOSIT PAID			PHONE NUMBER	
TRANSCRIPT ORDERED			DEPOSIT PAID	
TRANSCRIPT RECEIVED			TOTAL CHARGES	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			LESS DEPOSIT	
PARTY RECEIVED TRANSCRIPT			TOTAL REFUNDED	
			TOTAL DUE	

DISTRIBUTION: COURT COPY TRANSCRIPTION COPY ORDER RECEIPT ORDER COPY